DEPARTMENT OF CALIFORNIA HIGHWAT FATROL



APPLICATION FOR FLEET OWNER INSPECTION AND MAINTENANCE STATION LICENSE

CHP 361N (REV 01-	-98) OPI 062				Ple	ease print or	type		••••		
REASON FOR APPLICAT Initial license (\$1 Owner change (10.00)	Renewal (\$5.00) Late renewal (\$10.00)		•	ense lost or destro		and/or address (N	o fee)			
APPLICANT'S NAME							ATTENTION ATTENTION				
IF THIS IS A NAME CHANGE, ENTER PREVIOUS NAME						TELEPHONE NUMBER (INCLUDE AREA CODE)					
DOING BUSINESS AS (DE	BA IF DIFFERENT FR	OM APPLICANT'S NAME)									
STREET ADDRESS (INSPECTION AND MAINTENANCE STATION LOCATION)						STATE	ZIP CODE				
MAILING ADDRESS C						STATE	ZIP CODE				
LEGAL OWNER (INDIVIDI	UAL, PARTNERSHIP,	CORPORATION OR LLC)									
CALIFORNIA CARRIER IDEN	ORNIA CARRIER IDENTIFICATION NUMBER FILE CODE NUMBER CHP IMS LICENSE			E NUMBER	EXPIRATION DATE	Pow	ered :				
APPLICANT I					 OUND	1000	Towed:				
a. Has the applicant	t ever been issue	d a similar license by the De				er state agenc	y, another				
*		Other than a renewal of the	,	•	plain on reverse						
agency, another		ense denied, suspended, or ral Government? If "ye	revoked by the s" explain on	•	of California Higr	iway Patroi, a	notner state				
		tner, officer, director or contr									
Government?		the Department of Californi on reverse.	a Highway Pati	oi, another s	state agency, anot	ner state, or ti	ne rederal				
		CERTIF	ICATION AND	APPLICAN	T'S SIGNATURE						
pertaining to motor carri	er safety and vehicle to suspend or revok	conducted in compliance with all e equipment requirements. It is use the license. It is also understo rocation of the license.	inderstood that vio	olation of any l	aw or regulation may	result in the filir	ng a criminal action in	a court of law	or the	filing of	
SIGNATURE OF AUTHOR	RIZED REPRESENTAT	ΓΙVE	PRINT C	OR TYPE NAME	AND TITLE			DATE			
ISSUANCE OF LICENSE		ED BY THE CALIFORNIA I		TROL MOTO	OR CARRIER SA	FETY UNIT F	LOCATION CODE	DATE			
YES	NO										
COMMENTS/REMARKS											
CHP ACCOUNTING USE ONLY					CHP LICENSING UNIT USE ONLY						
DATE				LICENS	LICENSE NUMBER						
CASHIER				ISSUE I	ISSUE DATE		EXPIRATION DATE				
CHECK DATE		CHECK NUMBER	CHECK NUMBER		CA NUMBER		CONTROL NUMBER				
	LICENSE	E NAME AND MAILING A	DDRESS	1			1				
CHP	CHP					MAIL THE ORIGINAL COMPLETED FORM(S) WITH REQUIRED FEE TO:					
USE						CALIFORNIA HIGHWAY PATROL P.O. BOX 942902					
ONLY							NTO, CA. 94298-2	902			
	ATTENTI	ON:									